

DEPARTMENT OF HEALTH AND HUMAN SERVICES

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///// PUBLIC HEALTH UPDATE /////

January 15, 2004

TO: Hospital-based and other health care providers
FROM: Fred Schwartz, MD, Public Health Officer, Marin County
RE: Enhanced surveillance for SARS

Dear Hospital Based and other Health Care Providers:

Given the recent Severe Acute Respiratory Syndrome (SARS) situation in Guangdong Province, China recommendations for enhanced surveillance are described below. The California Department of Health Services (CDHS) plans to forward these recommendations to hospitals. I will also forward the related CDC Health Alert. Also please see other documents on our SARS website: A draft California Case Report Form for SARS-like Illness (FYI, to be used by Marin HHS in reporting to CDHS), instructions for SARS case reporting from local health departments to CDHS (summarizes the new SARS case definition), and algorithms for evaluating, reporting, and managing SARS patients.

SARS:

As many of you know, on January 5, 2004, the Chinese Ministry of Health and the World Health Organization (WHO) announced laboratory confirmation of SARS in a 32-year-old male television producer in Guangdong Province, China. This patient had onset of illness on December 16, 2003, was hospitalized, and had since recovered. The source of his infection has not been identified. On January 8th, suspect SARS was reported in a 20-year-old woman who works in a restaurant also in Guangdong, China. This patient had onset of fever on December 26, 2003, and was also hospitalized, but has not yet been laboratory-confirmed. And on January 12, we learned of another suspect SARS case in a 35-year-old male shopkeeper in Guangdong who had onset of fever on December 31 and who is now also hospitalized and awaits SARS laboratory test results. Contacts of these patients have been followed and, thus far, no illness has been reported among them. There is no known epidemiological link between these patients. WHO and the federal Centers for Disease Control and Prevention (CDC) have not issued any new travel alerts or advisories at this time.

Based on current information and on further discussion with CDC and the Council of State and Territorial Epidemiologists (CSTE), CDHS has agreed to **enhance** surveillance for SARS. CDHS and the Marin County Department of Health and Human Services (Marin HHS) are now **recommending**

that physicians maintain a greater index of suspicion of SARS in patients who require hospitalization for radiographically confirmed pneumonia or acute respiratory distress syndrome (ARDS) AND who have (in the 10 days before onset of illness) a history of travel to Guangdong Province, China or close contact with someone ill who had traveled there. Accordingly, for any patient who meets these criteria, we recommend the following actions:

1. **Immediately isolate** the patient using precautions appropriate for SARS (i.e., contact and airborne precautions). If no other pathogen is identified to explain the illness, isolation should be continued until 10 days after fever resolution and improvement of cough.
2. **Immediately report the patient to Marin HHS:** Monday-Friday 8:30AM-5PM: CD Unit: 415-499-7805. After Hours and Weekends: Call the County Sheriff Communications Center 415-499-7235, or -7237, or -7238, and ask to speak with the Health Officer on call. Marin HHS will then report the patient to the Infectious Diseases Branch at CDHS.
3. **Consider testing the patient immediately for evidence of SARS-CoV along with other viral and bacterial pathogens.** Laboratory testing for SARS-CoV should be done immediately rather than waiting the usually recommended 72 hours after admission. SARS testing is available at a limited number of local public health laboratories and at the California Viral and Rickettsial Diseases Laboratory (VRDL). Please contact the Marin HHS Public Health Laboratory 415-499-6849 or the CD Unit 415-499-7805, Monday-Friday 8:00AM-5:00PM, to coordinate testing. After Hours and Weekends: Call the County Sheriff Communications Center 415-499-7235, or -7237, or -7238, and ask to speak with the Health Officer on call.
4. Hospital Infection Control or other appropriate staff should work with Marin HHS CD Unit to **identify and evaluate close contacts of the patient, in particular household members and persons who provided care to symptomatic patients**, daily for fever ($T > 100.4$ F or > 38 C) or respiratory symptoms (cough, shortness of breath, or difficulty breathing) for 10 days after last exposure to the patient. These contacts may continue with their daily activities and work routines as long as they don't have any fever or respiratory symptoms. Contacts who develop fever or respiratory symptoms should be asked to stop going to work or school and should be medically evaluated.

As described in the CDHS November 18, 2003, SARS Surveillance and Response Planning Guide for California Health Care Facilities (at <http://www.dhs.ca.gov/ps/dcdc/disb/sars.htm>), CDHS continues to recommend that health care providers and public health officials **consider SARS in the differential diagnosis of patients who have required hospitalization for radiographically confirmed pneumonia or ARDS and had no identifiable etiology after 72 hours of hospitalization AND who had one of the following risk factors in the 10 days before the onset of illness:**

- Travel to mainland China (outside of Guangdong Province), Hong Kong, or Taiwan, or close contact with an ill person with a history of recent travel to one of these areas, OR
- Employment in an occupation associated with a risk for SARS-CoV exposure (e.g., healthcare worker with direct patient contact), OR
- Part of a cluster of cases of atypical pneumonia without an alternative diagnosis (infection control practitioners and other health care professionals should be alert to pneumonia clusters among health care workers in the same facility).

These recommendations could change depending on whether additional cases are laboratory-confirmed. If you have questions about these latest SARS surveillance recommendations, please call the Marin HHS CD Unit at 415-499-7805.

Additional information about SARS can be found at: <http://www.cdc.gov/ncidod/sars/> and updated guidance at: <http://www.cdc.gov/ncidod/sars/updatedguidance.htm>